



CITY OF RICHWOOD
1800 Brazosport Blvd. Richwood, TX 77531
Telephone 979-265-2082 Fax 979-265-7345

AUTHORIZATION FOR AUTOMATIC DRAFT PLAN

Name on Your Utility Account:

Utility Account Number:

Service Address:

Date of Birth:

Driver's License Number:

Social Security Number:

Home Phone Number:

Work Phone Number:

Financial Institution Name:

Financial Institution Address (City & State)

BANK ACCOUNT NUMBER TO BE CHARGED:

CIRCLE ONE
checking/savings

PLEASE READ BEFORE SIGNING!!!!

I authorize the City of Richwood to begin deductions for my monthly utility bill with the financial institution named. Enrollment in the automatic payment plan may be discontinued any time by sending a request, in writing, to the City of Richwood. My authority will remain in effect until revoked by my financial institution, the City of Richwood, or myself. I understand that both my financial institution and the City of Richwood have the right to terminate this payment plan or my participation therein. *If I have two insufficient bank drafts within one year, the City will terminate my enrollment in bank drafting.*

I understand that I will be responsible for the first bill that I receive after the City obtains my application. However if my bank is currently set up in the bank drafting program my automatic payment plan will be effective with my first bill. **PAYMENT WILL BE DRAFTED ON THE DUE DATE!**

Signature (Must be authorized for the account listed above)

Date

WRITE "VOID" ACROSS CHECK AND TAPE HERE.
(Please tape - DO NOT STAPLE)